DATE DUE

PART B - FEE(S) TRANSMITTAL

PE Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

6124553801

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

PREV. PAID ISSUE FEE

1 5 2008 SEP

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate [24] further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indigated sees corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for the property of the proper

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

53148

APPLN. TYPE

7590

08/08/2008

HAMRE, SCHUMANN, MUELLER & LARSON P.C. P.O. BOX 2902-0902 MINNEAPOLIS, MN 55402

09/16/2008 HDEMESS2 00000034 503478 10521630

01 FC:1501 02 FC:1504 1440.00 DA

300.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Mele Caufman	(Depositor's name)
Mru Gubnan	(Signature)
September 15, 2008	(Date)

TOTAL FEE(S) DUE

APPLICATION NO. FIRST NAMED INVENTOR FILING DATE ATTORNEY DOCKET NO. CONFIRMATION NO. 10/521.630 01/19/2005 Elji Ueda 10873.1556USWQ 4212

PUBLICATION FEE DUE

TITLE OF INVENTION: DEFICIENCY DETECTING APPARATUS FOR OPTICAL DISK

SMALL ENTITY

ISSUE FEE DUE

nonprovisional	NO	\$1440	\$300	\$0	\$1740	11/10/2008		
EXAMINE	R	ART UNIT	CLASS-SUBCLASS					
NGUYEN, LD	ІН ТИІ	2627	369-100000	•				
Change of correspondence address or indication of "Fee Address" (37 °FR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or agents OR, alternative (2) the name of a single registered attorney or a	3 registered patent attorneys yely, e firm (having as a member a gent) and the names of up to meys or agents. If no name is	Hamre, Schumann, Mueller & Larson, P.C. 3			
ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI	an assignee is iden 37 CFR 3.11. Com	tified below, no assignee	data will appear on the part of the part o	atent. If an assignee is identif	ied below, the do	cument has been filed for		
Matsushita El		dustrial Co.,	• •	Osaka, Japan				
lease check the appropriate	assignee category o	r categories (will not be pr	inted on the patent):	Individual Corporation or	other private grou	ip entity Government		
la. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			b. Payment of Fcc(s): (Ptease first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3478 (enclose an extra copy of this form).					
Change in Entity Status	AALL ENTITY CIAL	15 See 37 CFR 1 27	b. Applicant is no long	ger claiming SMALL ENTITY	status. Sec 37 CF	R 1.27(g)(2).		
NOTE: The Issue Fee and Ponterest as shown by the reco	blication fee (if rec rds of the United St	uired) will not be accepto stes Patent and Trademark	d from anyone other than to Office.	he applicant; a registered attorn	ey or agent; or the	assignce or other party in		
Authorized Signature Typed or printed name	Wh			Date September Registration No. 30,3	15, 2008			
his collection of information	n is required by 37 (CFR 1.311. The information		emin a benefit by the public whimated to take 12 minutes to control to take 12 minutes to control to the total to the total to the total t	nich is to file (and			
Nexandria, Virginia 22313-	430.			ormation unless it displays a va				

"FOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE